

The CHANGES Programme:

Quarterly Report: July - September 2002

The CHANGES
PROGRAMME

Basic Education and Policy Support (BEPS) Activity

CREATIVE ASSOCIATES INTERNATIONAL[®]

In collaboration with

CARE, THE GEORGE WASHINGTON UNIVERSITY, AND GROUNDWORK



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CREATIVE ASSOCIATES INTERNATIONAL, INC.

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Quarterly Report No. 6: July – September 2002

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Prepared for:

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I. EXECUTIVE SUMMARY

The quarter July-September 2002 saw the continuation of activities in the two main components of the CHANGES programme (CSMC and SHN), as well as in the two crosscutting components, HIV/AIDS and the Small Grants Mechanism. At the end of September, the CHANGES programme reached its halfway mark in terms of time in its initial three-year phase. Overall, while the SHN component continues to perform as expected, the CSMC has yet to fully hit its stride in terms of achieving its desired outcomes: motivating communities and schools to develop and implement action plans and to submit proposals for small grants to implement initiatives that address girls' education and HIV/AIDS.

During the present reporting period, on the **Community Sensitization and Mobilization Campaign (CSMC)** six new field researchers and two senior researchers were recruited to supplement the existing six researchers, which enabled the researchers to operate as two separate teams in districts. A ten-day training workshop was conducted during July to orient the new researchers and to upgrade the skills of the existing researchers. In Kazungula and Kalomo Districts, nearly 160 two-day workshops were conducted by Zonal-level Community Facilitators (ZCFs) to sensitize and mobilize approximately 3,300 PTA members, teachers, and community leaders to address issues of girls' education and HIV/AIDS in their schools and communities. Also during this quarter, the CSMC expanded into two further districts, Choma and Livingstone, in which research and verification were conducted, and the ZCFs were trained in Choma District and started their community-based work. As suggested at the beginning of this summary, while a considerable number of activities are taking place in terms of research and training, the full CSMC model has yet to bear significant fruit in communities in terms of the development and implementation of community and school action plans, the submission of proposals, and the receipt of small grants. Translating the early steps of the model—the research and ZCF and community training—into the desired concrete outputs remains the main challenge the CSMC component faces.

In the **School Health and Nutrition (SHN)** component, the major achievement during this quarter was the planning and implementation of the phase two survey of pupils. Although the resurvey will actually conclude early next quarter, the bulk of the work—training 55 teachers and seven health workers from the new 20 intervention schools, training 22 administrators of the Cognitive Assessment Instrument (CAI), and carrying out the biomedical and cognitive surveys of approximately 2,000 pupils in the 40 intervention schools (20 old and 20 new) and the 20 new control schools respectively—was completed by the end of September. Importantly, the data that is obtained from the phase two survey will enable the SHN team to make important comparisons—both in terms of worm infestation prevalence and nutrient deficiencies, and cognitive ability and functioning—with data from last year's baseline survey. The anticipated gains that are documented will provide the much-needed rationale for taking the SHN programme to scale throughout Zambia. Important achievements this quarter in addition to the resurvey included the development of a SHN MIS (Management Information System) work plan that will involve establishing a pilot health MIS system in Chipata and Chadiza Districts that collects and analyzes data from all 80 pilot schools. Once established, this prototype MIS system will be replicated in other districts as the SHN programme expands. Also during this quarter, the drug distribution system established through medical stores, DHMTs (District Health

Management Teams) and RHCs (Rural Health Centres) was monitored and fine-tuned while mass treatment of 11 of the original group of 20 intervention schools continued.

Intense focus on the two main components of the CHANGES programme resulted in a situation where **HIV/AIDS**, one of the two crosscutting components of the programme, received relatively less attention this quarter. In Eastern Province (hereafter EP), the planned operations research in HIV/AIDS counseling in schools was implemented, involving 15 school counselors and approximately 60 clients (pupils). The aim of the research was to determine the effects of the use of English, as opposed to local languages, in counseling, particularly HIV/AIDS counseling. Considerable qualitative data have been obtained from the carrying out of the research, and the data are presently being analyzed. In addition to this research, the SHN and CSMC teams participated in a number of HIV/AIDS-related forums: a TB/HIV/AIDS workshop, the NGO Forum for HIV/AIDS in EP, the National Union of Teachers HIV/AIDS Workshop, and a NORAD-sponsored HIV/AIDS workshop in Choma in which the CSMC Research Coordinator presented findings on the community-based research the CHANGES programme had conducted in Kazungula District.

The **Small Grants Mechanism**, the other crosscutting component of the CHANGES programme, gained momentum during the current reporting period, especially in EP. Of a total of ten grant proposals submitted by CHANGES to CARE International, five were funded this quarter -- four in EP and one in SP. The flow of grants in both provinces, especially in SP, is expected to accelerate considerably in the remaining 18 months of the CHANGES programme's initial phase since several of the major difficulties that had been impeding progress were resolved.

Finally, with regard to **Programme Administration**, the CHANGES programme, in Lusaka and in the two provinces, worked closely with two USAID assessment teams, one an Education Sector Review team and the other a Country Strategy team. Programme staff met with the consultants, provided information, and hosted meetings and site visits to contribute to the teams' work. Overall progress on the SHN component and the innovativeness of the refocused CSMC strategy garnered accolades from the consultant teams and a commitment from USAID to extend the CHANGES programme beyond its current 31 March 2004 end date. Efforts are underway to assemble an extension design team, which will complete the design work next quarter. Additionally, the CHANGES teams in Lusaka and the two provinces worked with an intern from USAID on assessing data quality to ensure accurate reporting on major USAID indicators. Finally, during August and early September, the new CHANGES programme manager in Washington, DC came to Zambia to gain firsthand knowledge of the programme, to meet key MOE counterparts, and to assist with problem solving and programme fine-tuning.

II. ACCOMPLISHMENTS/ACHIEVEMENTS DURING THE QUARTER

In this section, the progress and achievements attained during the July-September 2002 quarter will be highlighted for both of the major components of the CHANGES programme and their corresponding USAID Intermediate Results (IRs)—the Community Sensitization and Mobilization Campaign (CSMC) and School Health and Nutrition (SHN)—as well as the two crosscutting components: HIV/AIDS and the Small Grants Mechanism.

A. Community Sensitization and Mobilization Campaign (CSMC) (IR 2.1: Improved Quality of Learning Environments in Targeted Areas)

1. Progress on Indicators

Although the actual CSMC indicators remain the same, the target numbers for many of the indicators were revised in August 2002. During a review conducted in August, four months after the programme was refocused in March, it was determined that some of the target figures were too ambitious given the time that remains and some of the implementation realities on the ground.

Priority/Category	Indicator	Means of verification	Target	Actual as of 9/90/02
1.Participation of girls and other vulnerable children in basic education	Increase in % of enrolment and retention rate of girls and other vulnerable children in basic education	Yearly school records (Data collected from five selected schools in each district)	Enrolment: 22% Retention: 30%	Enrolment Baseline: 16% increase from 2000 to 2001 Retention Baseline: N/A
Indicator 1. The enrolment baseline of 16% increase in girls' enrolment from 2000 to 2001 was obtained from provincial records. For that same period, the enrolment increase was 22%for boys. The target for girls has been set at 22% in an effort to see girls' enrolment increased to be at par with boys' enrolment. The retention rate target has been set at 30%. Although no baseline information is available for this indicator, it was felt that the USAID target of 87% would be more attainable if the programme was working in urban areas. The high number of rural schools selected as research sites has influenced the CSMC to set the retention target at a lower rate.				
2. Sensitization and Mobilization	Number of schools, community local leaders, P.T.A. members, and pupils sensitized and mobilized (to take action) concerning HIV/AIDS and girls/vulnerable children's education	Zonal-level Community Facilitator (ZCF) action plans and field reports	82,000	5,818
Indicator 2. There are 82 zones in the nine selected CSMC districts. Five schools and catchment areas are selected per zone. It is anticipated that at least 200 individuals within each school catchment area will be sensitized and mobilized as a result of the CSMC programme. (This figure will most likely be higher when the remaining catchment areas in each zone, which will have only community meetings and IEC inputs rather than receive all the inputs of the full CSMC model, are included.)				
3.Gender and Equity	Number of provincial, district, and zonal officials			

	and community-based animators sensitized and trained in gender and equity issues in education	Workshop attendance figures	365	203
Indicator 3. There will be approximately three participants from each zone, and five district-level officials from each district trained in ZCF workshops in each district. Issues pertaining to gender and equity will be part of that training curriculum. Therefore, a target of 365 has been set (including 74 community mobilizers trained in Kazungula and Kalomo) from the nine selected districts.				
4. Action Research	Number of communities participating in action research	Researchers' field reports	299	138
Indicator 4. Six villages are selected in each of the five selected school catchment areas in a district. Therefore, 30 villages in a district are expected to participate in action research. As such, according to the current work plan, a total of 270 villages will participate in action research from the 9 selected districts. (The additional 29 villages were from Kazungula and Kalomo Districts in which all villages (89) participated in action research rather than only 60).				
5. Research and Verification	Number of community members present to verify the research	Head-count by researchers	18,000	6,701
	Number of Theatre for Development performances for verification and research	Researchers' field reports	90	40
Indicator 5. There are a total of 45 school catchment area research sites in the nine districts. Two drama presentations will take place in each catchment area to verify research findings, for a total of 90 drama performances. It is anticipated that approximately 200 community members will attend each of the performances.				
6. Participatory Monitoring	Number of community activities (as detailed in action plan) monitored	Monitoring plans and reports	1,230	15
	Number of communities monitoring their own progress	Monitoring plans and reports	820	21
Indicator 6. With 410 school catchment areas in nine districts, it is anticipated that ZCF teams, district officials, and/or the CSMC team members will monitor at least three community activities in each catchment area. At the same time, at least two communities in each catchment area will have action plans that will be self-monitored by the communities.				
7. Life Skills	Number of zonal-level action plans including training on the use of life skills modules	Zonal-level action plans	41	0
Indicator 7. 82 Zonal-level action plans will be developed; half of those are expected to include material on life skills.				
8. Information, Education, and Communication (IEC) Interventions	Use of a variety of communication media focused in promoting girls' and other vulnerable children's education and in sensitizing community members (including teachers, children) about HIV/AIDS proliferation and its	Actual media products	7	1 (Role Model booklet)

	mitigation			
Indicator 8. The target for media products is a total of eight, comprised of two radio programmes for HIV/AIDS, two radio programmes for girls' education, two illustrated annual reports for stakeholders, and one CSMC newsletter.				
9. Action Plans	Number of action plans developed by districts and zones (ZCFs)	Actual count of action plans filed at district, zonal and CSMC offices	82	65
	Number of communities developing community action plans		820	139
Indicator 9. 82 ZCF teams will be established in the nine districts, and each will develop an action plan for sensitization and mobilization in their zone. It is anticipated that two communities in each of 410-school catchment areas will develop community action plans.				
10.Capacity-building at all levels	Number of provincial, district, and zonal-level officials and community based animators able to facilitate community-based activities in participatory ways.	Workshop participant list	365	203
Indicator 10. There will be approximately 246 participants from the nine districts (82 zones x 3 persons) trained as ZCFs and about 45 district and provincial officials. Therefore, a target total of 365 has been set (which includes 74 community mobilizers trained from Kazungula and Kalomo Districts) in the nine districts in Southern Province.				

2. Highlights

Training (and Refresher Training) of Field Researchers:

During 7-18 July, a training workshop was conducted in Choma for the six new researchers who had been recruited during the last quarter, the two new senior researchers, and the six original researchers, for whom the training was more of a refresher course. The training course was divided into two parts. The first part aimed to provide some theoretical background on the evolution of PRA/PLA (Participatory Rural Appraisal/Participatory Learning and Action) as approaches to rural development, and to equip the researchers with skills on how to use PRA/PLA tools. Dr. John Milimo of the Participatory Assessment Group (PAG) facilitated this first part of the workshop. The second part of the training aimed to strengthen the capacity of the researchers to use Theatre for Development as a tool to verify research findings with community members and to bring social change to rural communities. Professor Mapopa Mtonga of the University of Zambia (UNZA) facilitated this five-day portion of the training.

Research and Verification in Choma District:

Research and verification was completed in Choma District, culminating in drama performances on 29 July that were observed by two members of the USAID Education Sector Review Team, Dr. Paul Hebert and Professor Lungwangwa of UNZA. The duration of the research and verification was reduced because two research teams were working simultaneously.

Planning for Programme Implementation in Choma District:

On 19 July a consultative meeting was held in Choma to plan the post-research and verification implementation of the CSMC, attended by representatives of the three line ministries (MOE, MOH, MCDSS) and the CHANGES team. During the meeting a district mapping exercise was conducted and 39 ZCF (Zonal-level Community Facilitators), three from each of the 13 zones in the district, were identified. Also the tentative dates for the training of the ZCFs and district officials were agreed upon.

Training of ZCFs in Choma District:

The ten-day training workshop for the newly recruited ZCFs from Choma District was conducted during 19-30 August. The training covered the same topics as those delivered in previous ZCF workshops, with some refinements. In all, 46 people participated in the training, including 39 ZCFs (three each from the 13 zones), three from the district MOE, two from the MOH, and two from the MCDSS. By the end of the workshop, the 13 ZCF teams had completed their action plans for the next four months of activities.

Stakeholders' Meeting in Livingstone District:

A meeting of major stakeholders, the first step in starting the CSMC in a new district, was held in Livingstone on 12 August, chaired by the Director of the Livingstone DHMT. In attendance were: District In-service Provider (DIP) and Examinations Officer from the DEO's office, Director and Medical Officer from the DHMT, Acting Provincial Head of the MCDSS, Social Welfare Officer (provincial), Community Development Officer, senior Inspector of Schools (Provincial), and the CHANGES team, including the 15 field researchers.

The purpose of the meeting was to familiarize the three line ministries with the CHANGES programme and its multi-sectoral approach to promoting girls' education and preventing the spread of HIV/AIDS. Each phase of the CSMC model was presented and discussed. During the meeting the five school catchment areas in which the research and verification will be conducted were selected on the basis of the following criteria: language, cultural practices, socio-economic status, location (rural, urban, peri-urban), infrastructure, HIV/AIDS prevalence, and enrolment and retention rates of girls. The following five schools and their catchment areas (six villages each) were selected as research sites:

Mahululu Middle Basic School	(rural)
Simoonga Upper Basic School	(rural)
Palmgrove Upper Basic School	(peri-urban)
Shungu Upper Basic School	(urban)
Zambezi Upper Basic School	(urban)

Research and Verification in Livingstone District:

Following the Livingstone stakeholders' meeting, the researchers divided into two groups and commenced the research and verification in the (above) five catchment areas. The research and

verification were completed during 8 August – 21 September. The CHANGES Senior Technical Advisor and Dr. Frank Dall, new Programme Manager in Washington, DC, were on hand to observe the drama performance and wrap-up discussions with community members from Mahululu School.

Kazungula and Kalomo District Community Training Workshops:

Throughout the reporting period, ZCF teams continued to implement community-based training workshops for community leaders, PTA members, and teachers in Kazungula and Kalomo Districts. By the end of the quarter, 74 such workshops had been conducted (this includes workshops held in the previous quarter) for 1,537 stakeholders from 10 zones in Kazungula District. In Kalomo District, 84 workshops were held for 1,876 stakeholders from 13 zones. The community-based workshops were just starting in Choma District at the end of the present quarter.

Ongoing Monitoring of Activities in Kazungula, Kalomo, and Choma Districts:

The implementation of zonal-level work plans in Kazungula, Kalomo, and Choma Districts was monitored on a regular basis as the ZCF teams continued carrying out the activities in their work plans. In addition to monitoring by district-level officials, the CSMC Field Coordinator undertook monitoring visits in Kalomo District during 1-3 September, as well as in Choma District during 16-23 September.

Refresher Training of Kazungula District ZCF Teams:

In the CSMC strategy, after the ZCF teams in a given district have completed their initial community mobilization and sensitization activities in their respective zones (approximately 3-4 months after the ZCFs are recruited and trained), they reassemble for a brief refresher workshop. The objectives of the refresher workshop are:

- To review progress made by the CSMC in the district
- To encourage ZCFs to share challenges and lessons learned
- To provide additional training to ZCFs to fill gaps in their skills and experience
- To make resolutions for the way forward: develop action plans for future activities.

The first of these refresher workshops was held for ZCFs from Kazungula District during 24-26 September in Livingstone. The workshop was attended by 22 ZCFs, six district-level officers, and three provincial-level officers. The workshop helped to refocus activities in the district and to rejuvenate the ZCFs.

Laying the Groundwork for Expansion to Sinazongwe District:

The CSMC Research Coordinator traveled to Sinazongwe District during 23-24 September to arrange for the first stakeholders' meeting, which took place on 27 September. Sinazongwe is the fifth district (of a planned nine) to be included in the CSMC. The purpose of the stakeholders' meeting was to introduce the CSMC, establish the district team that will oversee

implementation in the district, clarify the roles of the various stakeholders, and select the five schools and catchment areas in which the research and verification will be conducted. The five schools selected were:

Siameja Middle Basic School	(Siameja Zone)
Malima Middle Basic School	(Malima Zone)
Ngoma Middle Basic School	(Mweezya Zone)
Sulwegonde Middle Basic School	(Sulwegonde Zone)
Maamba Mine Upper Basic School	(Maamba Zone)

Establishment of District and Provincial CHANGES Focal Points:

In a meeting with the SP PEO (Provincial Education Officer) in July to review progress, it was decided that focal point persons are needed specifically for the CHANGES programme if the CSMC is to receive the level of government attention and input it requires in order to be successful. The PEO therefore designated the Planning Officer at the provincial MOE to be the Provincial Focal Point and, at the same time, designated one person in each of the nine districts in which the CSMC is, or will be, operational as District Focal Point persons. The establishment of these focal point persons has improved the implementation of the CSMC.

Information, Education, and Communication (IEC) Developments:

During the current reporting period, the IEC consultant presented the CHANGES Role Models Booklet and the Kazungula District Profile to the MOE editorial team for editing and comments. Additionally, the consultant started work on the formatting of the Kalomo District Profile.

B. School Health and Nutrition (SHN) (IR 2.2: Improved Delivery of School-based Health and Nutrition Interventions to Support Pupil Learning)

1. Progress on Indicators

Category/Level	Indicator	Means of Verification	Target Numbers	Actual Numbers
Child Quality Measures				
Education	Increase in cognitive assessment scores	Scores from Cognitive Assessment Instrument (CAI)		1 st Year baseline follow up survey conducted - 60 schools –assessment of 2000+ pupils' cognitive assessment and new reading test
Health	Reduction in worm infection prevalence	Preliminary results indicates substantial reduction in infection		1 st Year baseline followup survey conducted Sept/Oct 2002, 2000 samples collected from 40 schools-evidence of substantial reduction in bilharzias and worm infestation-vitamin A and

				iron analysis to be done by TDRC- teachers doing mass treatment using drugs that have arrived at health centres from DHMTs
Nutrition	Increase in hemoglobin levels	Semi-annual biomedical assessment	Subsampling to be done in April 2002-141 pupils	1 st Year baseline followup conducted Sept. Oct. 2002- preliminary results show increase in haemoglobin levels
Community Sensitization and Mobilization				
PTA/Community meetings/ADC (Area Development Committee)/ Neighborhood Health Committees	# of meetings to discuss SHN issues; problems analyzed and responded to.	Survey reports; field monitoring –minutes of meetings	By end 2002 100 meetings held by PTAs, ADCs, and Neighborhood Health Committees	40 communities and school catchment areas (approx. 10-12 schools/catchment) sensitized through popular drama/public meetings and discussions with headmen 80 meetings of PTA and SHN promoting committees held
PTA/Community action plan development and implementation	Increase of PTAs/communities supporting SHN interventions with specific action plans	Survey reports; field monitoring	Cumulative total of action plans received 2001-31 2002-60 2003-80	62 community action plans developed and submitted for small grant funding 5 small grant projects have been awarded- 5 additional scheduled by end
IEC				
Media strategy	Media strategy developed and implemented including radio, TV adverts, newsletters, newspaper.	Strategy available	Media strategy (regional and national)	Media strategy developed
IEC materials	IEC materials developed for SHN advocacy and Training	IEC materials available	2002-12 products Radio spots- TV spots- Pamphlets Newsletters Brochures 2003-15 new products	Local language producers visited Eastern Province and are currently collecting material and interviewing to produce Radio programmes broadcasts during last quarter- 2x per month on SHN and HIV- SHN posters and brochures distributed to all EP districts

Teachers/pupils	# of teachers using IEC materials for SHN teaching-including life skills	Observation/monitoring of teachers	2002-150 teachers trained 2003-150 trained 2004-50 trained	120 teachers using worm HE flipchart, local action manual, and brochures
Training				
Teachers and administrators	# of teachers trained in school-based health and nutrition interventions	Reports	2002 –250 2003-350 cumulative total teachers trained administers 2002=50 2003=100 2004=200	Additional teachers trained in drug administration for 20 new intervention schools; administrators trained in SHN interventions; 20 teachers and DIPS (District In-Service Providers) trained to administer the CAI –11 new testers trained
Pupils	# of pupils who have received the set number of health education lessons	Reports	By end 2002 15,000 pupils received the lessons By end 2003 25,000; by March 2004, 30,000	To start in 2002 Based on pupil enrolment in 80 selected schools 10,000 pupils benefiting from HE lessons
Health workers, community leaders, PTA members.	# PTA exec.members, ADC, trained in collaborative methods, group participation techniques, SHN advocacy, and management skills # Health workers trained in SHN advocacy and SHN issues	Reports and field monitoring	By end 2002, 400 trained; by end of 2003, an additional 250 PTA, health workers and community leaders trained; by March 2004, a further 100 additional	Management skills training of 50 teachers-including basic financial management- as part of small grant component Additional financial management training conducted with CARE International. PTA executive orientations scheduled for 3 rd Quarter.

2. Highlights

Baseline Survey Follow-Up:

Mass treatment of pupils was conducted at Lukhalo School, which had a high prevalence of bilharzia. More than 271 pupils were treated for bilharzia and worms. The EP Coordinator and his SHN advisor, Josias Zulu, were assisted in this task by the school's teachers; cooperation and compliance were good, and no side effects were observed.

Preparation for Phase Two Survey:

The SHN team continued the recruitment of staff for the second survey scheduled for September-October. By the end of July, ten nurses and nine laboratory technicians from Chipata were committed to working on the survey and the local veterinary laboratory pledged to provide seven staff and six microscopes, as well as lab space. Seven thousand units of juice and biscuits were purchased for pupils to consume before they give blood and take deworming drugs. Also, vehicles were reserved in the districts to carry out the survey. During the week of 19-23 August, the EP Coordinator, Ms. Catherine Phiri (MOE/HQ SHN), and the CHANGES Senior Technical Advisor met several times with Dr. Lesley Drake of PCD (Partnership for Child Development) to conduct further planning for the EP survey. Numerous issues pertaining to logistics, staffing, and allowances were finalized during those meetings. In addition, letters were written to inform the DHMT (District Health Management Team), the veterinary lab, and all schools (control and intervention) of the upcoming survey, and all forms for treatment, consent, and requesting drugs were photocopied. For more details on the planning meetings with PCD, see *Appendix A: PCD's Trip Report, 16-23 August 2002*.

Cognitive Assessment Phase Two Survey Preparation:

During 29 July-2 August, Dr. Elena Grigorenko of Successful Intelligence (SI) (Yale University) came to Lusaka to further the planning for the phase two survey, particularly relating to the use of the Cognitive Assessment Instrument to measure the gains being made through the biomedical interventions. During this week, Dr. Grigorenko achieved the following: fine-tuned the CAI (through substituting components of the CAI with better quality copies and instructions), reviewed the tasks of the testing personnel during the training, developed a plan for data collection, and established the parameters for the SI budget for the phase two survey. Another important task accomplished during this time was the recruitment of a new local consultant (Mr. Bestern Kaani) to replace the original consultant who resigned her position. Mr. Kaani, after joining the CHANGES team, undertook preparatory work for the survey, including taking an inventory of existing materials and recommending additional materials for the survey, developing a hiring plan for the survey, and drafting a budget for the CAI portion of the survey.

Training of Teachers from the Second Group of Intervention Schools for the Phase Two Survey:

During the week of 20-25 August, SHN drug administration training was conducted for teachers from the second group of 20 intervention schools in anticipation of their coming on line during the second survey. In all, 55 teachers, seven health workers, and one community development officer were trained. Field work, during which the participants applied the skills they were acquiring, took place in local schools. The recently completed SHN training manual was used for the first time in the training, and many useful observations and comments were received that will be incorporated in the revised version of the manual. As an adjunct activity, Mr. Benedicto Phiri, the CHANGES SHN Training Coordinator, started work on a manual for use in sensitizing district-level officials on general SHN issues and the systems and processes of the overall SHN programme.

Training of New CAI Testers:

During 9-13 September, 11 people newly recruited to administer the CAI during the second survey were trained at the Resource Centre in Chipata. On the last day of the five-day workshop, the new testers were joined by 11 experienced testers who had participated in the baseline survey last year. The testers were trained to administer the CAI and the Grade 5 National Assessment tests in Literacy in English and Nyanja. A sub-sample of the experienced testers was also trained to administer a reading assessment to individual pupils in addition to—or in lieu of—the CAI and Grade 5 National Assessment.

The testers were divided into four teams of five testers, each with a team leader; the team leaders received additional training on how to monitor and supervise implementation of tests, as well as specific training in data management. For more details on the training of CAI testers and the start of the phase two survey, see *Appendix B: Trip Report of Dr. Linda Jarvin (Successful Intelligence)*, 6-21 September 2002.

Implementation of the Phase Two Survey:

Implementation of the phase two survey was started on 23 September and was scheduled to be completed on 9 October. The survey personnel included two consultants from the Partnership for Child Development (PCD), David Mwandu and three technicians from TDRC (Tropical Disease Research Centre), four lab technicians from the University Teaching Hospital (UTH) Department of Parasitology, Chris Simoonga of the Central Board of Health (COH), Catherine Phiri and Webby Chanda of MOE/HQ, locally hired personnel, including 15 nurses, technicians from Petauke, the Chipata Central Hospital, and the Veterinary laboratory, and provincial MOE and CHANGES staff. As such, it was a complex effort involving myriad players from different organizations and departments.

The participating personnel were divided into four teams, each comprised of CAI administrators and biomedical personnel (height/weight assessors, blood collectors, hemacue users, and parasitologists). Four schools were covered each day and, at the end of each day, blood, urine, and stool samples were analyzed by technicians in the Chipata labs, and data from the CAI were entered by teams in the Provincial Resource Centre. Although some logistical and other implementation difficulties were encountered, the survey proceeded well despite the enormity of the task. In all, approximately 2,000 pupils participated in the survey from 40 (20 new and 20 old) intervention schools and 20 (new) control schools.

Planning for the SHN MIS:

The SHN MIS dimension of the programme made considerable gains during the present reporting period. During the week of 19-23 August representatives of PCD and CHANGES, and the EMIS Senior Technical Advisor, Dr. Drake Warrick, met with Dr. Wendy Heard of HEARD (University of Natal, Durban) to discuss issues related to the SHN MIS (e.g., data requirements and collection, use of the School Health Card) and to plan for its formal launching. The Scope of Work for the MIS piece of the overall programme was refined during those meetings, and considerable clarity was achieved on what shape the MIS should take and how it should interface

with the existing DMIS and EMIS systems. It was further decided that Dr. Heard would return to Zambia during the third week of September and spend some time in EP with the EP Coordinator, Ms. Catherine Phiri, and provincial officers to finalize a detailed implementation plan for the SHN MIS. Details of the August trip by Dr. Heard are detailed in *Appendix C: Trip Report of Dr. Wendy Heard (HEARD), 19-23 August, 2002*.

Dr. Heard returned to Zambia in September and spent the bulk of her time in EP conferring with the SHN team who had started implementing the phase two survey. A number of meetings were held during this time with the PEO and other SHN staff; SHN data requirements were reviewed, data collection forms were drafted, and data management requirements were discussed. The specific outcomes of those discussions and deliberations, and the work plan that was developed for the way forward, are detailed in *Appendix D: Trip Report of Dr. Wendy Heard (HEARD), 20-27 September 2002*.

Community Activities and Support Visits to Schools:

Early in the quarter, SHN team members Josias Zulu and Benedicto Phiri undertook numerous visits to SHN schools, including the two demonstration schools, JM Cronje and Magwero, to support their ongoing implementation of the SHN programme. As part of the school visits, Mr. Zulu continued his efforts to develop health-promoting schools as outlined in the Action Guidelines distributed to all SHN pilot schools. While several schools have set up SHN committees and have written school health policies, some schools have been slow to initiate those activities. The EP Coordinator also went to many of those schools in addition to the 12 schools that have been part of the HIV/AIDS and counseling operations research (see below in HIV/AIDS section). During August, the CHANGES team visited schools in Chama District to monitor progress and to check compliance in the distribution of drugs. Additionally, monitoring was conducted in Chiparamba, Cronje, Mshawa, Kapita, Sisinje, Makew, Chikoka, Mtaya, Dzoole, and Tamanda Schools to review health cards and SHN activities, to inform teachers on health promoting guidelines, and to encourage the establishment of SHN committees.

Monitoring the Drug Distribution Process:

In late August, the CHANGES team visited the DHMT at the Central Hospital to monitor the flow of SHN drugs that had been received and to check on how they are being stored and used. Unfortunately, it was observed that records at the pharmacy were poorly kept and scattered in various places. After locating the receipt notices from Medical Stores (which had tested and then distributed the drugs) and comparing what was actually received, a significant discrepancy was noted between what was in the records as delivered and what was actually delivered (only 21 of 35 units were actually delivered). This situation was corrected at that particular DHMT and a follow-up was conducted with Medical Stores in Lusaka regarding distribution and where the drugs might have been “lost.” It is hoped that similar ongoing fine-tuning of the drug distribution system will result in enhanced efficiency of the overall system.

Information, Education, and Communication (IEC) Outputs:

The IEC consultant, Mr. Gershom Musonda, accomplished the following SHN-related activities during the present quarter:

- Facilitated SHN-IEC orientation meetings for nine MOE teachers and seven Zambia National Broadcasting Corporation (ZNBC) radio and television producers in Lusaka. The meetings were followed by field trips to Eastern, Lusaka, Southern, Western, Northwestern, and Luapula Provinces to collect information for radio and television programmes. (This is part of the training and skills transfer programme the IEC consultant is undertaking.)
- Attended a Management Implementation Team (MIT) meeting in the MOE in which it was decided that the SHN editorial team will be merged with a broader BESSIP/MOE editorial team. A follow-up editorial meeting by a task force set up during the MIT meeting dissolved the SHN-IEC and BESSIP editorial teams to form a smaller editorial team comprised of 15 people.
- Presented the following draft publications to the editorial team for editing:
 - SHN magazine (second issue)
 - SHN sanitation booklet
 - SHN stickers
 Editing was postponed to a later date.
- Exhibited SHN publications and audio and video recordings at the National Agricultural and Commercial Show in Lusaka during early August.
- Edited the 2003-2004 SHN school calendar.
- Participated in the GlaxoSmithKline (GSK) training programme for Community Partnership Managers for the Personal Hygiene and Sanitation Education (PHASE) Project in Kenya. Meetings are currently being planned for implementing PHASE in Zambia.
- Participated in the phase two SHN survey where activities of the biomedical and cognitive teams were videotaped; also two of the schools (Cronje and Majwero) that have received small grants were visited, to record progress.

C. HIV/AIDS (Crosscutting Component)

1. Progress on Indicators

Southern Province:

1. HIV/AIDS	Number of provincial, district, and zonal officials and community based animators sensitized and trained in HIV/AIDS issues.	Workshop attendance figures	365	203
Indicator 1. There will be approximately 246 participants from the nine districts trained as ZCFs and about 45 district and provincial officials. HIV/AIDS sensitization will be a part of that training curriculum. Therefore, a target total of 365 has been set (which includes 74 community mobilizers trained from Kazungula and Kalomo Districts) in nine districts in Southern Province.				

2. HIV/AIDS Peer Educators	Number of zonal-level action plans, including the training of peer educators for HIV/AIDS	Zonal –level action plans	41	5
Indicator 2. Of the approximate 82 zonal-level action plans, 50% (41) of those are expected to include the training of peer educators.				

Eastern Province:

Category/Level	Indicator	Means of Verification	Targets	Current Status
Teachers	# teachers using life skills Modules/lesson plans used in teaching	Field monitoring	By end 2002-120 teachers using life skills modules By end 2003-250 By March 2004 Cumulative total =450	Workshop for AntiAIDS clubs patrons (26) and Senior Managers (10) on HIV/AIDS issues and workplan development 30 Headmasters trained in HIV/AIDS issues.
School/Communities; Pupils and village communities	# schools engaged in debate competitions, quizzes, drama, choirs, essay writing, and various other innovative activities	Field monitoring Reports	Situation analysis of Anti-AIDS clubs in 40 schools in 4 districts completed By June 2002 By end 2002 40 schools engaged in activities- By end 2003 80 By March 2004 90 schools	15 Teacher counselors trained in use of counseling manual and other HIV/AIDS issues 12 Teachers trained in production of local HIV/AIDS materials and translation process

2. Highlights**HIV/AIDS Sensitization Meeting (EP):**

In July, the EP Coordinator, the CHANGES SHN Advisor, and four Inspectors from the MOE attended an HIV/AIDS sensitization meeting for teachers at Chipata Day Secondary School. The meeting was organized by the headmaster of the school and was a follow-up to the HIV/AIDS workshop held in May that was sponsored by CHANGES (see the last Quarterly Report). Each officer presented a brief overview on topics such as basic facts on HIV/AIDS, the role of interactive radio in combating HIV/AIDS, counseling issues, and the role of teachers in HIV/AIDS prevention.

Operations Research on HIV/AIDS and Counseling:

The qualitative operations research designed by Dr. Bradford Strickland, Mr. K. Hamwaka (Provincial Counseling Focal Point), and the EP Coordinator began in July starting with a workshop on 30-31 July for the participants in the research. Prior to that the team had designed the study, developed the survey instruments, and conducted a literature search. The study will investigate issues related to counseling and the difficulties associated with using English as the sole language for conducting counseling. The use of English, some counselors have noted, restricts the free flow of information and may, in fact, connote wrong messages. As all available materials for counseling in Zambia are in English, it is hoped that this study will raise linguistic issues and make counselors more aware of the influence language has on how their clients relate to them.

The research design was further refined through discussions with other officers in the MOE and Professor R. Serpell, a long-time resident of Zambia who has conducted education/linguistic research in EP and has been recruited to be a consultant for the study. The team agreed on the number of school counselors to be involved, data collection and analysis procedures, and the time frame. Mr. Hamwaka recruited 15 counselors from nearby schools, and the first workshop to train the counselors was conducted to orient them to the forms to be used and other aspects of conducting the research, such as note-taking, counseling techniques, linguistic considerations related to HIV/AIDS, and sexuality. A total of four clients were counseled by each of the 15 counselors - some counseling done in local languages and some in English. The study lasted approximately two months. The data is being analyzed using qualitative techniques, and a follow-up workshop will be held in November, to be attended by the 15 participating counselors.

In late August, Mr. Hamwaka shared preliminary results of the research with the CHANGES Senior Technical Advisor and Dr. Frank Dall of the Creative Associates International home office who was in Zambia on a field visit. During the course of these discussions it was agreed that it would be good to provide training in qualitative data analysis to assist in this research initiative and to build capacity for analyzing and presenting qualitative data obtained from communities in the ongoing SHN programme.

HIV/AIDS Workshops and Forums (EP):

In addition to the above, the following HIV/AIDS-related activities were carried out during July in EP:

- CHANGES team members facilitated a TB/HIV/AIDS workshop for health center staff, organized by CARE International; 35 health center staff attended.
- The NGO Forum for HIV/AIDS was held on 12 July; the EP Coordinator and Mr. Mbewa (Provincial HIV/AIDS Focal Point) attended.
- Josias Zulu facilitated several sessions of the National Union of Teachers HIV/AIDS Workshop; 40 teachers attended the workshop from Chipata-area schools.

Participation in HIV/AIDS Workshop in Choma (SP):

The SP Coordinator was invited by the David Livingstone Teacher Training College to attend a three-day workshop in Choma District, funded by NORAD (Norway Agency for Development). Because the SP Coordinator was unable to attend the workshop, the CHANGES Research Coordinator attended on her behalf and presented the HIV/AIDS-related findings from the research CHANGES had conducted in Kazungula District.

D. Small Grants Mechanism (Crosscutting Component)**1. Progress on Indicators***Southern Province:*

1. Small Grant Proposal Development	Number of provincial, district and zonal officials and community based animators sensitized and trained in proposal development for small grant awards.	Workshop attendance figures	365	203
Indicator 1. There will be approximately 246 participants from the nine districts trained as ZCFs and about 45 district and provincial officials. Proposal development for small grants awards will be a part of that training curriculum. Therefore, a target total of 365 has been set (which includes 74 community mobilizers trained from Kazungula and Kalomo Districts) in nine districts in Southern Province.				
2. Small Grant Awards	Number of communities developing proposals for small grant awards to support their community-based action plans	Review and count of community-based action plans	820	94
Indicator 2. At least two communities in each catchment area preparing community-based action plans will develop proposals for small grants to support activities in their action plans.				

2. Highlights**Progress Review Meeting:**

Early in the quarter, on 15 July, a meeting was held at the Lusaka office of CARE International to review progress of the small grants part of the programme and to problem-solve on issues requiring attention. The meeting was attended by the CARE small grants manager and the two CARE provincial small grants officers, the EP Coordinator and his SHN Advisor, the CSMC Field Coordinator, and the CHANGES Senior Technical Advisor. During the meeting it was announced that several grants were ready to be made in EP and one in SP, and that the CARE vehicle would soon be deployed full-time in Livingstone. The ongoing concern about the slowness of the grant-making process was also addressed, though the consensus view was that it is very difficult to artificially accelerate what is an inherently time-consuming and labor-intensive process. Nevertheless, all participants agreed to do their part to streamline the grant-making process and to make it as efficient as possible so that more grants will be made as the CHANGES programme moves ahead.

Overview of Progress (From CARE International Sub-Grant Manager's Report):

The sub-grant component has significantly benefited from the several technical assistance visits made by the CHANGES Senior Technical Advisor to the programme field sites. The visits have assisted the sub-grant component to programmatically be part of the overall CHANGES programme. While in EP, the sub-grant component started as an integral part of the School Health and Nutrition (SHN) component, the same has not been the case in SP until recently. In SP the Community Sensitisation and Mobilisation Campaign (CSMC) component progressed for some time without much input from the sub-grant component, which resulted in dysfunctions between the community action plans and the generation of project proposals. During the present quarter, six project proposals were received from EP, four of which were funded; the other two proposals will be funded in the next quarter. In SP, four project proposals were received and one was funded. The proposals that were not funded were sent back to the communities for rewriting to bring them more in line with the programme objectives, or to be referred to other funding organizations.

Progress in Southern Province (SP):

In SP, the Sub-grants Officer has been engaged in building the capacity of Zonal Community Facilitators (ZCFs) to facilitate the sub-grant awarding process. ZCFs are being trained in the development of community action plans, strategies for community mobilization, sub-grants, and proposal writing. The work of the Sub-grants Officer has been enhanced by the provision of a vehicle. As noted in the previous overview, four project proposals have been submitted, one has been funded, and the other three proposals are being revised. Details are provided in the following table:

Name of Organisation	District	Project Title	Project Activities	Beneficiaries
Sisters of St. Francis (Funded)	Kazungula	HIV/AIDS awareness creation	HIV/AIDS campaigns Home based care Train counselors Growing of crops	Communities and school-going children
Maunga Basic School PTA (Still under review)	Kalomo	School improvement	Classroom rehabilitation Construction of HIV/AIDS resource centre HIV/AIDS awareness campaigns	Pupils and the surrounding communities
Nyawa Middle Basic School PTA (Still under review)	Kalomo	Increase learning opportunities for the girl-child	Campaigns for girl child education Construct girl boarding hostels Purchase of school desks HIV/AIDS awareness campaigns	School girls and the school neighboring communities
Siamasimbi Basic School PTA (Still under review)	Kalomo	Siamasimbi School Project	Train peer educators Crop production HIV/AIDS awareness campaigns	Surrounding population of about 1,4000 people and the school children

Although project proposals have started coming in SP from Kazungula and Kalomo Districts, the nature of the proposed initiatives are still focused largely on school construction. The Sub-grant Officer is presently concentrating on sensitizing ZCFs in Choma District to develop community

action plans from which project proposals will be drawn, and hopes to shift attention away from infrastructure inputs towards areas more in line with CHANGES programme content areas.

The Sub-grants Officer in SP has also been participating actively in district review meetings of the CHANGES Programme, the first of which was recently held in Kazungula District. In these short workshops, ZCFs focus attention on how to help schools and communities develop better action plans and project proposals. The Sub-grants Officer also conducted monitoring visits in Kazungula and Kalomo Districts this quarter to reinforce the development of CAPs/SAPs (Community Action Plans/School Action Plans) and assisted communities in proposal development. As a result of the monitoring visits, 30 project proposals have been submitted from various zones in Kazungula and Kalomo Districts to the CHANGES office; after further refinement, many of these will be forwarded to CARE International in Lusaka to be considered for funding.

Progress in Eastern Province (EP):

The following proposals were submitted by CHANGES EP to CARE International for funding during the period:

Name of Organisation	District	Project Title	Project Activities	Beneficiaries
Women Against AIDS and Poverty (Funds disbursed)	Chadiza	HIV/AIDS Awareness creation	- Drama groups - Produce HIV/AIDS leaflets in local languages - Capacity building in Anti AIDS Clubs in Schools	School children and communities in school catchments
Magwero Basic School PTA (Funds disbursed)	Chipata	Integrated fish farming	- Rehabilitate 5 fishponds. - Poultry rearing - School feeding - Rehabilitate 3 classrooms - HIV/AIDS awareness creation	Over 650 pupils and communities in school catchment area
John M Cronje Basic School PTA (Funds disbursed)	Chiapata	School based health and nutrition	- Cattle rearing - Crop production - Rehabilitate an HIV/AIDS resource centre	500 pupils attending school as well as local communities in school catchment area
Taferansoni Basic School PTA (Funds Disbursed)	Chadiza	Construction of VIP Toilets to make the school girl friendly and a life skills center	-Construct VIP toilets -Under take HIV/AIDS awareness creation campaigns -Life skills training	417 school going boys and girls and community members
Dzoole Basic School (Funds to be disbursed)	Chipata	Nutrition and HIV/AIDS awareness creation	- Construct feeding centre - Crop production - Cattle rearing - HIV/AIDS campaigns - Classroom rehabilitation	280 pupils and community members from school catchment area
Zambia Student Christian Movement (Funds to be disbursed)	Chipata	Gender awareness and girl child education	- Train peer educators - Drama groups - HIV/AIDS/STIs and behavior change	Pupils in basic schools in and around Chipata and community members

For the four groups that have been funded, the Sub-grants Officer is focusing on capacity building for financial monitoring, and monitoring of the sub-grants that have started. The workshop on HIV/AIDS for members from different communities and branches, which the

Women Against AIDS and Poverty had planned to hold, could not be held during the reporting period due to delays in the release of funds to the PTA from their bank. At JM Cronje Basic School, the rehabilitation of an HIV/AIDS resource center and construction of 4 VIP latrines is on schedule. The community contribution of local materials such as sand and water has been slow due to the prevalent hunger situation in the area; most community members are busy searching for food. However, when the school PTA recently held a general meeting with the parents and community members, it was agreed that to speed up the work, the PTA will hire transport to move the materials to the project site.

The development of fishponds at Magwero is progressing well. The school has been linked to the Fisheries Department for technical assistance in the rehabilitation of the fishponds. The other work in progress at Magwero is the rehabilitation of a 1x3 classroom block as well as the construction of VIP latrines.

Activities at Taferansoni Middle Basic School PTA have not yet commenced.

In terms of meetings and networking, the Sub-grants Officer in EP has continued to meet with other NGOs and government departments engaged in community development work. He attended a meeting of the Adventist Development and Relief Agency (ADRA) on the "Child Alive" Project. The Sub-grant Officer also attended a workshop on HIV/AIDS organized by the Ministry of Education through the Office of the District Education Office for Anti-AIDS club patrons, PTA members, and committee members of local NGOs.

The Sub-grants Officer also participated in the biomedical and cognitive assessment phase two survey of the SHN component, which helped him become more conversant with issues that should be addressed in future proposals, and enabled him to more effectively advise communities on possible interventions in line with the CHANGES programme objectives

III. PROGRAMME ADMINISTRATION

On the level of programme administration, there were several notable developments during the present reporting period. These are summarized below.

Participation in USAID's Implementation Advisory Committee (IAC) Meeting:

On 15 July, the EP Coordinator and his Zambian SHN advisor, the CSMC Field Coordinator, and the CHANGES Senior Technical Advisor attended the semi-annual USAID IAC meeting, held at the Pamodzi Hotel. During the meeting the EP Coordinator and the CSMC Field Coordinator gave brief updates of progress and issues on the SHN and CSMC components of the CHANGES programme. Considerable discussion ensued regarding the challenges being encountered in the CSMC's channeling funds directly to government ZCF teams at the zonal level, which furthers the MOE's agenda of decentralization. During the meeting, the CHANGES representatives met members of USAID's country strategic plan development consultant team who had just started their work. Arrangements were made for the team to visit programme sites in EP and SP.

Consultations with USAID Education Sector Review and Country Strategic Plan Teams:

During the reporting period, the EP and SP Coordinators and the Senior Technical Advisor in Lusaka met with a number of USAID consultants to assist with USAID's development of its next Country Strategic Plan and to begin to conceptualize the extension of the CHANGES programme.

In SP, the Coordinator met with the Education Sector Review team both in Choma and Livingstone for discussions, and to review the CSMC. Drama performances were observed, schools were visited, and a meeting was held with the Provincial Education Officer.

In EP, during 3-12 July, Dr. Bradford Strickland of USAID/Washington visited the province to work on a concept paper for the extension of the SHN component of the CHANGES programme. Dr. Strickland, the EP Coordinator, and key ministry counterparts held extensive discussions pertaining to the acceleration and extension of the SHN programme. The concept paper that was written as an outcome of those discussions was discussed with Dr. Musonda, BESSIP Coordinator, and the Permanent Secretary of the MOE, and elements of the strategy will be incorporated into the broader strategy developed by the aforementioned USAID Education Sector and Country Strategy consultant teams.

In Lusaka, the Senior Technical Advisor met with the same consultants to discuss the CHANGES programme from an overall management point of view and to begin brainstorming possible scenarios for the extension of the CHANGES programme starting in April 2004. Finally, on 12 August, both the EP and SP Coordinators and the Senior Technical Advisor attended the stakeholders' meeting in which the USAID consultant groups gave a debriefing on their findings.

Data Quality Assessment:

During July, an intern from USAID, Rebecca Jeffries, traveled to both EP and SP to consult with the Coordinators about data collection procedures and data quality; she also verified some of the data that had been collected and were on file. In EP, the Coordinator developed a matrix of data collection procedures, which includes various data categories, data collection responsibilities, sources of data, frequency of collection, and purpose and use of data. In Lusaka the Senior Technical Advisor also met with Ms. Jeffries to discuss data reporting procedures. All of the procedures and agreements have been documented in the USAID report entitled "Data Quality Assessment," and will be adhered to by the CHANGES programme components.

Field Visit by the New CHANGES Programme Manager in Washington, DC:

During 17 August – 4 September, Dr. Frank Dall, the programme's new Washington-based manager, visited Zambia to gain more firsthand knowledge of the CHANGES programme and to meet key ministry counterparts in Lusaka and in the provinces. In Lusaka, he had numerous discussions with the Senior Technical Advisor, met with Anderson Chibwa of CARE International, and held a number of debriefing meetings with key MOE/HQ colleagues at the end of his visit, including the Permanent Secretary, BESSIP Coordinator, and SHN, Equity and

Gender, and HIV/AIDS Component Managers. In EP, Dr. Dall observed the training of teachers from the next group of intervention schools, gave the first small grant check to JM Cronje School, and conducted discussions about the SHN component and its extension with the EP Coordinator. In SP, he observed the training of Choma ZCFs, had meetings with DEOs and the PEO, assisted with a review of the CSMC and the revision of some of the target numbers and indicators, and addressed some management issues. By the end of his visit, Dr. Dall, although already very knowledgeable about Zambia from previous experience, had learned a great deal about the CHANGES programme, and is now in a better position to effectively support the programme from Washington.

Management Change on the CSMC:

Another reason the new Programme Manager in Washington, DC came to Zambia (see above) was to assess the management situation on the CSMC. For a considerable period of time, the CSMC programme had been suffering from low morale on the programme team and serious underperformance in terms of meeting some of its key output targets, especially in relation to numbers of action plans developed and submitted, proposals for small grants developed and submitted, small grants allocated, and HIV/AIDS programming developed. This shortfall in performance had, within the past six months, been attributed to poor management and leadership on the part of the SP Coordinator by several external consultants who had worked closely with the CSMC team, as well as by the Senior Technical Advisor. As such, when the same view was reinforced by the visiting Programme Manager from Washington, DC, the decision was taken by Creative Associates International in Washington, DC to make a management change. At present, the process of recruiting a Zambian national to be the new SP Coordinator is underway, and it is anticipated that this change in leadership will enable the CSMC to achieve its full potential in the 18 months that remain of the initial phase of the CHANGES programme.

Planning for the Extension of the CHANGES Programme:

Preceding sections of the present report make reference to work done with USAID consultants to begin the process of planning the extension of the CHANGES programme. In addition to this, work started in September to recruit a three-person team to design the actual extension during next quarter in close collaboration with MOE and MOH colleagues. This team will be comprised of Zambian experts in SHN and girls' education, and one expatriate consultant. It is anticipated that the extension design and budget will be completed and submitted to USAID by the end of December 2002.

IV. CHALLENGES/LESSONS LEARNED

Considerable progress was achieved during the present reporting period in the face of several constraints and challenges. These constraints and challenges (and the lessons learned from dealing with them) are briefly summarized below.

Financial Management of Zonal-level Teams (SP):

On the CSMC, an ongoing challenge is the complex and difficult-to-monitor process of disbursing funds to ZCF teams, the timely expenditure of the funds, and appropriate accountability and retirement of those funds. Issues that have arisen so far include logistical difficulties (ZCF teams' difficulties traveling to and from district headquarters to deal with financial matters), ZCF difficulties in understanding financial procedures, inappropriate expenditures, altered receipts, and delays in reconciling funds. Many of the difficulties being encountered were anticipated inasmuch as disbursing funds directly to the zonal level has not been done by the MOE before. The CSMC team continues to problem-solve regarding these issues and challenges, and it appears the difficulties are diminishing rather than increasing.

Time Constraints of Teachers on ZCF Teams (SP):

In SP, an issue that is increasingly coming to the fore is the lack of cooperation of head teachers, who feel that the CHANGES programme is diverting too much of participating teachers' time from their regular teaching duties. This is an issue that was anticipated from the beginning, and is one that will need persistent monitoring and creative problem-solving to overcome.

Monitoring of CSMC Zonal-level and Community Activities (SP):

Another ongoing challenge the CSMC faces is the ability to sufficiently monitor activities at the zonal level and in communities. The CSMC core team itself can carry out only minimal monitoring and supporting of field activities. At the same time, due to shortages of staff and vehicles, unavailability of allowances, and the need to attend to other work, district-level officials are also finding it difficult to undertake sufficient monitoring of the programme. This is another important area of the programme that is receiving ongoing attention and problem-solving.

Effects of Drought and Hunger (EP and SP):

In the quarterly report for the period January-March 2002, it was noted that in EP, hunger and food insecurity were having a serious effect on enrolments for the new school term in February. During the present reporting period, the CSMC field researcher teams found their work affected by the increasing food shortage in SP. The researchers have found it necessary to provide food to the families with whom they are staying, and have at times encountered difficulties in mobilizing people to attend meetings and drama performances. In EP, the sample size during the phase two survey was smaller than anticipated because of pupil absenteeism due to food insecurity and hunger.

Drug Distribution in the SHN Programme (EP):

As noted in the Section on SHN "Highlights" (II B.2), some difficulties have been encountered in the drug distribution process, involving drugs being diverted and not reaching the intended DHMTs and RHCs in the districts. At first blush, it appears that drivers of the vehicles transporting the drugs from Medical Stores in Lusaka to district off-loading points, may be

responsible. This is an issue the MOE and MOH will need to deal with swiftly and in a forthright manner if the viability of the SHN programme is to be maintained. Remedial actions are presently under consideration.

SHN Office in Chipata (EP):

Ongoing delays in the completion of the SHN office in the provincial MOE, Chipata has hampered work and has delayed hiring an Administrative Assistant due to lack of office space. It is expected that the office will be completed during the next reporting period.

Constraints and Difficulties Regarding IEC Outputs (EP and SP):

Although progress has been made on a fairly consistent basis by the IEC consultant, delays in approving publications for printing have resulted in information becoming outdated. Moreover, disbanding the SHN-IEC editorial team and merging it with the broader BESSIP editorial team has caused delays in approving and finalizing IEC products.

V. ANTICIPATED ACTIVITIES (OCTOBER-DECEMBER 2002)

During the next reporting period, the following activities will be started, continued, or completed:

CSMC:

- Community-based workshops will continue to be facilitated in Kazungula, Kalomo, and Choma Districts, and started and largely completed in Livingstone and Sinazongwe Districts.
- Research and verification will be completed in Sinazongwe District and started in Gwembe District.
- ZCFs will be trained in Livingstone and Sinazongwe Districts.
- The refresher course for ZCFs in Kalomo District, and possibly Choma District, will be conducted.
- Action plans will be developed and implemented in Kazungula, Kalomo, Choma, and Livingstone Districts.
- Meetings will be held at the provincial level and at the district level (in Kazungula) to review progress; these meetings will take place on a regular basis in all districts.
- Monitoring of all activities in all participating districts by provincial, district, and zonal-level officers and by the CSMC team will continue.

- Kazungula and Kalomo District profiles will be finalized and disseminated; work will start on the Choma District Profile.
- IEC outputs: radio programmes for girls' education and HIV/AIDS will be developed, and hopefully broadcasted.
- The CHANGES CSMC workplan for 2003 will be developed and submitted to USAID.

SHN:

- Follow-up visits will be made to all schools, particularly the 20 new intervention schools and the 20 new control schools.
- Treatment and the accessing of drugs by teachers at the health centers will be monitored.
- Teachers from the 40 selected SHN schools in Mambwe and Lundazi Districts (20 schools each) will be trained.
- Meetings will be conducted to disseminate the survey results to parents at 40 schools; these meetings will take place at the same time as scheduled PTA meetings.
- The 2003 CHANGES SHN work plan will be developed and submitted to USAID.

HIV/AIDS:

- The follow-up workshop for 15 counselors participating in the EP operations research will be held in November.
- The EP Coordinator and CHANGES staff will work with EP officials in developing the HIV/AIDS work plan for 2003.
- HIV/AIDS-related activities and initiatives that appear in community and school action plans in both EP and SP will be implemented.

Small Grants Mechanism:

- Work will continue in both EP and SP to assist communities in developing action plans and writing proposals, leading to the awarding of small grants. The pace of awarding grants should increase considerably now that many of the impediments that were slowing progress to date have been removed.
- Schools and communities that have received grants will be monitored on a continuous basis.

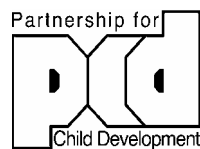
IEC:

- Publications for SHN, BESSIP, MOE, and CSMC will be edited.
- Radio and television programmes will be edited and broadcasted.
- The collection of information from rural areas by ZNBC and MOE staff will be monitored.
- Provinces will be visited to collect information for publications and broadcasting.
- The new editorial team at the MOE will be oriented.
- PHASE meetings will be facilitated in the Lusaka area.

* * *

Appendix A

PCD's Trip Report, 16-23 August 2002



School Health and Nutrition Programme – Year 2 Technical Assistance Planning Meeting (16th – 23rd August 2002).

As part of the CHANGES Programme (Task Order 807)

*Consultants: Lesley Drake (PCD Coordinator)
Wendy Heard (Management Information System Developer)*

Objectives

1. To deliver and discuss draft baseline survey report
2. To finalise preparations for the Eastern Province health and nutrition resurvey (September 2002)
3. To formulate a timeline and plan of action for the HIV/AIDS life skills master trainer workshop
4. To formulate a timeline and plan of action for the development of a management information system

Activities

16th-18th August: Meetings was held at the CHANGES office to discuss the objectives 1 – 3 outlined above. Objective 4 was discussed from 19th to 23rd August.

Individuals present were:

Catherine Phiri (MoE School Health and Nutrition Focal Point);
Ed Graybill (CHANGES, Chief of Party);
Paul Freund (CHANGES, School Health and Nutrition Manager);
Josias Zulu (CHANGES, School Health and Nutrition team member);
Frank Dall (Creative Associates, Senior Associate);
Lesley Drake (Partnership for Child Development)

CP confirmed that she had to attend a workshop the following week and would therefore be unavailable to meet with the team during this period. It was agreed that based on the decisions made during these 2 meetings, the consultants would meet with relevant parties and move the plans forward on behalf of CP. It was also agreed that CP would be kept informed of progress by telephone.

Objective 1

LD presented a *draft* baseline survey report. All health and nutritional analyses have now been completed. LD stipulated that this was a draft and would value the input of other colleagues on the interpretation of the statistical analyses. **A revised draft would be delivered to CHANGES ON 17TH September 2002.** It was proposed that the baseline survey would also be written up for publication in a scientific journal and a simplified document be produced aimed at a non-scientific community. This draft would be circulated to all stakeholders prior to submission.

Objective 2

The issue of whether the current famine situation in Eastern Province would hinder the success of the programme in terms of ethics and non-attendance was discussed. The ethics underpinning the survey approach were upheld. PF and JZ informed the group that most children were still attending school and in any event their team could follow up on any missing children during or directly following the survey.

PF and JZ updated the team on Eastern Province survey preparatory activities and reported that all was on schedule. The proposed start date of the survey (September 17th) was agreed upon. **PF, CP and PCD to finalise a detailed timeline for this.**

A form outlining details of survey team number and structure was presented by LD. It was decided that in order to avoid possible misunderstandings, survey team members would be allocated a specific team position. Each person (and their line manager) would be informed of their duties, per diem allocation and dates through which they would be required. A signed agreement would be obtained from all members. **CP, PF, JZ and LD would liaise further to finalise these positions and send letters** (see Appendix A for current status).

A revised daily schedule and diagnostic protocols, including coordination of the health teams activities with the cognitive assessment teams activities were presented by LD. PCD/SI staff are confident that the revised schedule is efficient, good working practice (Appendix B).

Transportation logistics. The availability of the required number of vehicles was discussed. PF and CP were confident that the vehicles would be made available from the various parties. However, it was agreed that a signed agreement may help concretise this. **EG and CP to discuss further.**

LD met with Dr J. Mwansa (UTH – Bilharzia Control Director, Parasitology Unit Director). One of the donated microscopes had recently been stolen. JM has been successful in finding a loan replacement for the duration of the survey. All other kit has been checked and approved. **PCD, JM and PF to formalise kit check list for all teams and transfer to site.**

LD presented the idea of submitting a Ministry driven proposal to the newly formed Schistosomiasis Control Initiative (SCI). SCI have recently received \$30 million for bilharzias control in Africa and are now considering countries for funding. The National Bilharzia Control Program (Directed by JM) have a national plan of action.

It was suggested that this plan is amended to include the CHANGES programme in the plan. **CP, EG and JM to explore this further.**

LD met with Christopher Simoonga (UNZA/MoE). He is keen to become involved in GIS aspects of the survey and will discuss with JM and CP. See objective 4
PCD/SI be responsible for all data entry using the agreed school and pupil codes. The data entry person employed last year was found to be unsuitable for further employment. **PCD and SI will liaise to develop a new strategy.** The DEP will be responsible for lodging the original consent/data forms with CHANGES/Chipata and copies of all original data forms to PCD and SI

Objective 3

Due to the limited time that could be spent on taking forward the HIV/AIDS life skills workshop as a team (EG, PF, CP, Alfred Sikazwe, Irene Malambo, CDC) it was decided that communication on this matter would be carried out by email.

One idea was to use the Interagency Task Team workshop in Kenya in November 2002 -at which Zambia will be represented (MoE, MoH, CDC, etc.)- as a meeting point at which discussions could be held. Alternatively, a workshop prior to this may be beneficial. In that case, **LD would identify an appropriate facilitator.** The team would evolve these ideas by email. **PF to respond to LD with specific comments on this.**

Objective 4

LD and Dr Wendy Heard met with Mr Bupe Masondo to discuss the dovetailing of the proposed SHN MIS returns in with DEMIS tracking tool; BM had no objections to additional data being added in to either system. Discussions were also held on the school mapping exercise and WH shared her experiences of the South African school mapping.

LD, WH also discussed with Mr Drake Warwick, Chief of Party, USAID-EMIS programme, the issues that could impact on the SHN MIS programme. The issues were:

- 2002 data is to be released by October 2002; data needed for the November BESSIP review. The 2002 SAS was conducted during May.
- The 2003 SAS form will be finalised by November 2002. The aim is to keep the same form (or core data set) for 3 years – 2003 through to 2005.
- The SAS 2003 returns are to be completed early in the new year and returned to Lusaka for capture by May 2003. Will be parallel system in pilot districts that test decentralised data capture.
- Under the USAID-funded EMIS programme 2 computers are to be provided to each District Office by the end of September 2002.
- Capacity building and training will take place during October-November 2002. Provincial and District based persons will be targeted and to be trained in basic introduction to computers, MS Office applications and the EdAssist application. At District level – the DEO and statistics officer will be targeted.
- It was highlighted that the EMIS programme includes the following aspects:
 - Establishing a training lab
 - Introducing electronic forms of communication, Head quarters – province – district office
 - Partnership programme – IRI
 - Developing work place IT policies.

As the SHN MIS was not dependent on a monthly return that the best option would probably be to include programme specific questions in the SAS, possibly under separate cover, and then operational issues relating to drug administration, should be completed through the drug administration control processes. It was confirmed that **PF** would be the best person to advise in terms of the current practices and procedures implemented in the drug administration programme. LD and WH also held talks with Mr Chris Simoonga, MoH, about the possibility of him being involved in the GIS application of the SHN MIS. It was agreed that it was important to build partnerships between MoH and MoE and CS also agreed to collaborate with PCD on the SHN programme. CP was kept informed of all developments by telephone.

The development and implementation of the SHN MIS was discussed by DW, EG, FD, LD and WH; unfortunately Mr Alfred Sikazwe was unable to attend.

The discussion was framed around the documents presented (Appendices C 1 and C 2). It was suggested that as part of the implementation plan, the existing memorandum of understanding between the Ministry of Health and Education be reviewed to consider how the implementation of the SHN MIS would affect this critical document. EG was concerned about the extra work load on staff during the busy survey period but it was agreed that experiencing the data collection *in situ* and holding meetings whilst travelling could advance the development of the MIS. **EG will confirm the proposed dates of 23 – 27 September 2002 for the visit of WH to the Eastern Province.** He also stressed that a detailed and time referenced implementation plan was required, and it was agreed that **WH** would produce this after the planned September visit.

CP was given an update telephonically on discussions and her support of these is recorded here.

LD and WH also met with Mr Richard Arden, DfID, about general issues and the DEMIS programme. RA indicated that the Ministry is in the process of restructuring and that this is affecting the Planning Section. It was suggested that when assistance is offered to the MoE in terms of the proposed DEMIS, the TA appointed to the MoE, Mr Ummuro Adano, could be a useful contact to assist in networking within the MoE.

A contract has been issued by PCD to WH to undertake this work (Appendix D).

Report prepared by Dr Lesley Drake

Appendix B

Trip Report of Dr. Linda Jarvin (Successful Intelligence), 6-21 September 2002

Cognitive Assessment for Basic Education Sub-Sector Investment Program in Zambia: School Health and Nutrition Component

This report summarizes the activities of Dr. Jarvin during her trip to Lusaka & Chipata (Eastern Province), Zambia September 6-21, 2002.

The objectives of the trip were:

- a) Conduct a train-the-testers workshop. The workshop will be conducted to train testers who will administer the cognitive assessment instrument in the 20 control and 40 intervention schools participating in the SHN program. Testers will be trained to administer the instrument and to collect and forward data to SI, as needed. This workshop will be held in Chipata, September 9-13, 2002.
- b) Coordinate efforts with the local management team. Local supervising personnel will be trained to monitor the implementation of the cognitive assessment in SHN pilot schools to ensure quality control and to report their observations and recommendations. In addition to training on how to monitor and supervise implementation, local managers will receive an orientation on data management and analysis as it applies to studying and reporting results from the cognitive assessment.
- c) Monitor the initial implementation of the cognitive assessment instrument in SHN schools and report findings. Implementation will start in Chipata and Chadiza districts on September 16, 2002.

All three objectives of the trip were met:

- a. Under the supervision of Mr. Bestern Kaani, local Project director, a workshop was held in Chipata, September 9-13, 2002. The workshop spanned 5 days for all new testers, and testers engaged in test administration and data collection the previous year joined the workshop on the last day. The name and status of testers is summarized in table 1 below. Testers were trained to administer the Zambia Cognitive Assessment Instrument (Z-CAI), the Grade 5 National Assessment (NA) tests in Literacy in English and Nyanja. A subsample of veteran testers was also trained to administer a reading assessment to individual pupils in addition to – or in lieu of – the Z-CAI and the NA.
- b. Testers were divided in 4 teams comprising 5 testers each,, and each team leader received additional training on how to monitor and supervise implementation of tests, as well as specific training in data management. Dr, Jarvin also worked closely with Mr. Kaani to insure that a management process be put in place, and with Mr. Jonathan Chibaula on data entry and management.
- c. The implementation was started on Monday September 16, and during the initial week all 20 control schools were visited and cognitive data collected form students in grades 3 through 7. In addition, height and weight data were collected form all students in grades 1 through 7.

Table 1. Participants in the 2002 workshop and test administration effort

Name	District	Previous participation	Gender	TS number
Banda, David	NON Local	Chongwe 2001	M	
Banda Exodus	NON Local	Novice 2002	M	43894
Banda, Numelo	LOCAL	Novice 2002	M	45064
Chirwa, Robbie	NON-Local	Chipata 2001	M	45380
Chiziba Goliath	NON Local	Chongwe 2001	M	43772
Kalumbila, Cosmas	NON Local	Chipata 2001	M	
Kampamba, Julius		Novice 2002	M	
Kasaro, Zedekia	NON Local	Chipata 2001	M	
Mwambula, Vestina	NON Local	Chipata 2001	F	44659
Ngalibe, Foster	NON Local	Chipata 2001	F	
Nyangu Zakeyo Ackim	?	Chipata 2001	M	44685
Nyimbiri, Ruth	NON Local	Novice 2002	F	46659
Nyirenda, Maxwell	LOCAL?	Novice 2002	M	43868
Phiri Rosemary (sister)	NON Local	Novice 2002	F	46561
Phiri, Gibson	NON Local	Chipata 2001	M	
Phiri Tomaida	NON Local	Novice 2002	F	45032
Simwanza Edna	LOCAL	Novice 2002	F	25430
Simfukwe Joseph	LOCAL	Novice 2002	M	88963
Tembo Kondwelani	LOCAL	Novice 2002	M	46176
Tembo Patson, Kanyama	NON Local	Chipata 2001	M	42663
Thole, Venus C.N.	LOCAL	Chipata 2001	F	10870
Zulu Wilson	NON Local	Novice 2002	M	45429

Appendix C

Trip Report of Dr. Wendy Heard (HEARD), 19-23 August 2002

Trip Report

Country : Zambia

Programme : Developing a School Health and Nutrition (SHN) Management Information System, as part of the broader Ministry of Education SHN/CHANGES programme under sub-contract to Partnership for Childhood Development

Contact Person/s : Lesley Drake, Partnership for Childhood Development
Catherine Phiri, MoE SHN Focal Point

Duration : Monday, 19 August 2002 through to Friday, 23 August 2002

Objective/s of visit : To gain further clarity on the implementation of the proposed SHN MIS as part of the MoE SHN/CHANGES programme in terms of:

- The scope, structure and functionality
- Implementation strategy linked to other EMIS initiatives

Monday, 19 August 2002

Arrived in Lusaka on Monday afternoon, to meet up with Lesley Drake. At this meeting learnt that no other meetings had been scheduled for the day, also learnt that Ms Catherine Phiri would not be in town for the full week, however, she could be reached by telephone.

Tuesday, 20 August 2002

Spent the morning at the CHANGES office with Lesley Drake, discussing the proposed scope of work and making arrangements for the remainder of the week.

In the afternoon met up with Mr Bupe Masondo of the MoE, to discuss progress made with the introduction of the monthly DEMIS tracking tool and investigate options to tie the SHN MIS return in with the DEMIS or School Annual Survey. Mr Masondo indicated that he had no objection to additions being made to either survey, should the SHN focus person identify the need to collect the data.

Spent some time with Mr Masondo discussing the school mapping exercise and sharing publications and some analysis that had been concluded following the South African School Mapping exercise.

Met up with Lesley in the late afternoon to develop some options (Annexure A) for the proposed SHN MIS. It was planned that these be tabled and discussed at a meeting scheduled for the following day.

Wednesday, 21 August 2002

Attended an arranged meeting with Mr Drake Warrick, Chief of Party, USAID-EMIS programme. Found this to be a most useful meeting. Mr Warrick confirmed the following issues that could impact on the implementation of the proposed SHN MIS programme:

- 2002 data is to be released by October 2002; data needed for the November BESSIP review. The 2002 SAS was conducted during May.
- The 2003 SAS form will be finalised by November 2002. The aim is to keep the same form (or core data set) for 3 years – 2003 through to 2005.
- The SAS 2003 returns are to be completed early in the new year and returned to Lusaka for capture by May 2003. Will be parallel system in pilot districts that test decentralised data capture.
- Under the USAID-funded EMIS programme 2 computers are to be provided to each District Office by the end of September 2002.
- Capacity building and training will take place during October-November 2002. Provincial and District based persons will be targeted and to be trained in basic introduction to computers, MS Office applications and the EdAssist application. At District level – the DEO and statistics officer will be targeted.
- It was highlighted that the EMIS programme includes the following aspects:
 - Establishing a training lab
 - Introducing electronic forms of communication, Head quarters – province – district office
 - Partnership programme – IRI
 - Developing work place IT policies.

Following the meeting with Drake Warrick, discussions were again held with Lesley Drake and it was confirmed, that the SHN MIS was not dependent on a monthly return and that the best option would probably be to include programme specific questions in the SAS, possibly under separate cover, and then operational issues relating to drug administration, should be completed through the drug administration control processes. It was confirmed that Dr Paul Freund, would be the best person to advise in terms of the current practices and procedures implemented in the drug administration programme.

Late in the afternoon Lesley and I met with Mr Chris Simoonga, of the MoH, to discuss the possibility of him being involved in the GIS application of the proposed SHN MIS. Chris agreed to work collaboratively with PCD on this project. Chris indicated the importance of building partnerships between the Ministries of Health and Education in order to ensure the success of the SHN programme.

A phone call was then made to Catherine Phiri to keep her abreast of developments. She appeared to be thrilled that Chris Simoonga was to be involved in the project and supported the proposed MIS developments.

In the evening, at a cocktail party, I was introduced to Dr Frank Dall, from the CHANGES office in Washington. It was agreed that we would meet the following day.

Thursday, 22 August 2002

Early in the morning an attempt was made to meet up with Mr Alfred Sikazwe of the MoE, however, this was not to be. Made an appointment to meet him at 9h00 the next morning.

Lesley and I then moved across to the CHANGES office, where we had a brief meeting with Ed Graybill and Frank Dall. The opportunity was provided for Lesley to update Ed and Frank on aspects of the SHN programme, other than the MIS, as it was agreed the MIS would be dealt with at an afternoon meeting. Spent the remainder of the morning writing up documents (Annexure 2 and 3) to be presented at the meeting.

A meeting was held with Drake, Ed, Frank, Lesley and I to discuss the development and implementation of the proposed SHN MIS. The discussion was framed around the documents presented (annexure 2 and 3). It was suggested that as part of the implementation plan, the existing memorandum of understanding between the Ministry of Health and Education be reviewed to consider how the implementation of the SHN MIS would affect this critical document. Ed raised some concern around the timing of the next visit, since this is an extremely busy time for Paul and others. It was agreed that Ed would discuss the issue with Paul, since there may be some benefit in observing the work being done and perhaps some of the discussions required could be done while travelling. Ed stressed that a detailed and time referenced implementation plan was required, and it was agreed that this would be done after the planned September visit.

Another phone call was made to Catherine Phiri to keep her informed. Again she indicated her support, telephonically, for what was being proposed.

Lesley and I then went across to the DfID offices to meet with Mr Richard Arden. We spoke quite a bit about general issues and I used the opportunity to brief Richard on the DEMIS programme. Richard indicated that the Ministry is in the process of restructuring and that this is affecting the Planning Section. It was suggested that when assistance is offered to the MoE in terms of the proposed DEMIS, the TA appointed to the MoE, Mr Ummuro Adano, could be a useful contact to assist in networking within the MoE.

That evening, Mr Kent Noel of USAID, hosted a dinner for Lesley, Frank and I together with Paul a colleague from Washington.

Friday, 23 August 2002

In the morning Lesley and I again attempted to meet with Mr Sikazwe, but he was called into a meeting with the PS and the Minister.

Lesley and I then transferred to the airport, had a brief meeting there before departing.

Prepared by: **Wendy Heard**
26 September 2002, Durban

Follow up required:

- Lesley Drake to circulate a trip report to Catherine Phiri and others in the MoE.
 - Ed Graybill will confirm the proposed dates of 23 – 27 September 2002 for the visit to the Eastern Province
 - Following the planned September visit the Implementation Plan for the SHN MIS to be completed.
 - Lesley Drake to draft a Scope of Work and forward this to Wendy Heard
 - Wendy Heard to prepare a budget plan for Lesley Drake once in receipt of Scope of Work
-

Additional contacts:

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Ummuro Adano

Annexure A

Different options to consider for introduction of School Health and Nutrition MIS

- Option 1:
- a. An attachment for the School Annual Survey (SAS) is prepared
 - b. A second page is introduced to the monthly-DEMIS return

Brief Description:

- a. A separate section is devised to capture the basic requirements of the School Health and Nutrition component. The survey to be conducted along with the general SAS. When submitted to District Office it can be separated out and then processed at the district office.
- b. A section is added to the proposed monthly DEMIS, particular to the SHN needs. This is processed along with rest of DEMIS system on a monthly basis.

“Pros”

- Employ existing process and systems for data collection and processing

“Cons”

- Data collected will cover different periods (SAS and Monthly DEMIS)
- Reliance on processing of SAS data before analysis can be conducted
- Not much monthly data that needs reporting
- ??Limited data that can be collected through DEMIS & attachment to SAS

- Option 2: a. A once off survey is used to collect the “static” data – this could be administered together with the monthly-DEMIS return

- b. A second page is introduced to the monthly-DEMIS return

Brief Description:

- a. A separate survey is designed to capture the basic requirements of the School Health and Nutrition component. The survey is used as an introduction to the DEMIS to be conducted along with the first month’s return. Processed along with DEMIS return.
- b. A proposed monthly DEMIS is modified to include the data requirements particular to the SHN needs. This is processed along with rest of DEMIS system on a monthly basis.

“Pros”

- Collect and process data required for analysis
- Build on existing data collection structures and processes

“Cons”

- Possible “duplication” of SAS data
- Not much monthly data that needs reporting

Option 3: a. Separate School Health Nutrition (SHN) tracking form required to be completed in Term 2

Brief Description:

- a. A separate form is designed to capture and track the requirements of the School Health and Nutrition component. The form is completed over the period of the second term as the SHN drugs are administered. The proposed form forms part of the SHN reporting structure.

“Pros”

- Self contained data collection instrument to serve specific purpose
- Specific time reference for schools
- No adaptation required to existing DEMIS or SAS
- Able to link to other datasets
- Part of the SHN reporting structure

“Cons”

- Logistics to ensure submission
- Possible overlap of some data elements

Version 1
Date: 21 August 2002

Annexure B

Guiding principles for implementation of the proposed SHN MIS – lessons learnt through the week’s activities

Objectives for the visit:

- i. To determine the scope, structure and functionality of the SHN MIS
- ii. Consider an implementation strategy linked to other EMIS initiatives

During the course of the week, meetings have been held with:

Bupe Musondo (Statistician, EMIS, MoE),
Drake Warrick (Chief of Party, USAID EMIS programme),
Chris Simoonga (University of Zambia Team and MoH)

Catherine Phiri (SHN Focal Person, MoE) was contacted telephonically.

Agreements reached:

1. National EMIS programme

- SHN specific data not part of the EMIS core data requirements, however the proposed SHN MIS will be reliant on drawing down critical data fields from the School Annual Survey (SAS) data
- SHN will not duplicate data capture of the SAS instrument
- Design of SHN MIS will be compatible with and aim to complement National EMIS
- Deadline for inclusion in 2003 SAS instrument – November 2002

2. District level focus

- Proposed system will be largely an “operational system” and therefore the District Level will be the focus. District level development also critical part of the Ministry Reform Programme.
- MIS will allow for data input at this level and basic reporting.
- Will be feedback back to the schools and data will be aggregated and fed up the system.
- Head Quarters to be empowered to do more detailed analytical work – statistical analysis, indicators, comparisons, trend analysis, etc.
- Aim to utilise Resource Centres – equipment and trained staff.

3. Building partnerships

- SHN MIS will be an opportunity to build, or strengthen existing partnerships between the DEO and DHO

4. Monthly DEMIS

- Implementation has not progressed and therefore no dependency to be paced on this system.
- (Wendy to pursue this matter within USAID MTT SOW)
- If implemented, SHN MIS and DEMIS will be complementary systems.

5. Training

- Given similarities of the EMIS and SHN MIS programmes – targeting similar persons, aim to empower district level personnel, same software applications, and similar approaches – there is spill over benefit of training.
- Agreement on skills to be transferred to different levels within the Ministry. Analytical and database system development skills to be invested in Head Quarters personnel.

6. Incremental System

- Proposed system to draw heavily on existing (paper) systems and processes.
- First phase will be a basic and functional system to support the Zambian MoE SHN/CHANGES programme.
- Next phase would include other SH programmes and initiatives.

7. Geographic Information Systems

- Throughout the design, piloting and implementation of the system, will also be working with Chris Simoonga of the MoH. His focus will be on the Health GIS aspects that will be complemented by other Education GIS experiences.

8. Resources

- District Offices do have computers and identified persons
- Some skills are in place, will build on these.

Proposed system

It is proposed that a database be developed to capture the returns collected from schools (and possibly clinic records) and that this be integrated into a district-based data entry and viewing system.

- The proposed system is to be developed using MS Access as a “**point and click**” **application** to minimise the over reliance of database manipulation or data management skills.
- All data collection processes will be aligned as far as possible to **existing data practices**.
- The data entry system will allow for first level **data verification** by building in adequate controls into the software.
- The data viewing system to have a pre-designed **reporting interface**, which will assist with the analysis of the data and also provide a means for providing feedback and encourage the sharing and utilisation of the data collected.
- The system will be based on **school specific** details. No additional pupil specific data is to be collected through this system.
- The proposed system will be aimed at the **District Education Officer**, District Health Officer and the district-based SHN focal point person.
- The proposed system to provide for the **aggregation of relevant data** to be provided to the province and then forwarded on to the EMIS unit at Head Quarters.

Ensuring sustainability

It is proposed that additional training be provided to the Head Quarters EMIS unit, in order to assist with ensure sustainability. This training should include:

Database development – including creating tables, advanced query design, form design, macros and menus and report design.

Data utilisation, analysis and presentation – including value-adding data analysis, calculating and interpreting basic education indicators and the use of visual graphics in data presentation.

GIS training – the use of GIS (geographic information systems) to present data, considering geographic variances and general spatial analysis methodologies.

Annexure C**Considerations for implementation of the proposed SHN MIS****Focus areas of the MIS:**

Drug administration
Implementation of SHN programme at school level
Impact on learners – drop-outs, academic achievement
Teacher training and utilization
Physical infrastructure – relating to SHN
Referrals to Clinic (side affects of drugs, insurance scheme)
Cost implications

Therefore a dependence on – existing paper based systems, EMIS, Examinations system, Clinic records, school mapping data.

Proposed process:

Activity	Timing	Persons Involved
Review of existing processes and assessment of expected deliverables of the SHN MIS	Visit to the Eastern Province, week 23 through to 27 Septmeber,2002	Paul Freund Catherine Chirwa Catherine Phiri Venus Thole DEO & DHO for 2 targeted districts DHMT representative (?) PEO representative (PCD, CS & WH)
Based on the assumption that all is achieved during the week long visit to the Province:		
Design of data collection instruments and reports, consideration of linkages to other systems, identifies roles and responsibilities of persons. Presentation to MoE.	Proposal by 1 November 2002. Consideration by MoE – by mid November 2002.	PCD, CS & WH Catherine Phiri MoE management
Database design and testing		WH
Draft of Manuals		
Training – data collection		
Pilot data collection instruments (1 or 2 districts)		
Training – system application – data entry and report		
Pilot data capture process (1 or 2 districts)		
Finalisation of Manuals		

Wide scale training District Province Head Quarters		
Implementation of system in Eastern Province		
Review and incorporate suggested amendments		

Appendix D

Trip Report of Dr. Wendy Heard (HEARD), 20-27 September 2002

Trip Report

Country : Zambia

Programme : Developing a School Health and Nutrition (SHN) Management Information System, as part of the broader Ministry of Education SHN/CHANGES programme under sub-contract to Partnership for Childhood Development (PCD)

Contact Person/s : Catherine Phiri, MoE SHN Focal Point
Paul Freund, CHANGES
Chris Samoonga, MoH
PCD and other members of the Fieldwork Team
EP & Chipata District MoE and MoH persons involved in SHN programme

Duration : Friday, 20 September through to Friday, 27 September 2002

Objective/s of visit : To observe fieldwork relating to the SHN programme in the Eastern province.
Meet with those working in the Eastern province to discuss and review existing processes and records to be integrated in the SHN MIS.
Aim to develop a common understanding of the proposed SHN MIS.
To discuss follow up activities and the proposed implementation plan with members of the team.

Friday, 20 September 2002

Flew in to Lusaka on Friday morning. Learnt that all arrangements had been made for the transfer to the Eastern province. Went across to the MoE but was not able to meet up with any of the SHN or DEMIS contact persons.

Saturday, 21 September 2002

Arrangements were made to meet at 08:00 in order to travel across to the Eastern Province. Briefly met up with Catherine Phiri at the hotel and agreed that we would meet on Monday to discuss the SHN MIS, also confirmed that we work together through the week to develop a common understanding of the MIS and confirm the data elements of the proposed MIS.

Left Lusaka as approximately 10:00 to arrive in Chipata at about 17:00.

Met up with Michael Beasley and Anthi Patrikios of PCD to discuss the proposed activities for the week.

Sunday, 22 September 2002

Met up with Dr Paul Freund during the course of the morning. Briefly discussed current practices and procedures relating to the SHN programme. The *“Guide for training teachers on administration of SHN drugs”* was provided as a reference and it was indicated that existing forms are included as well as an explanation of the flows. It was agreed that it would be best if Paul and I sat down with Catherine Phiri and Catherine Chirwa and tried to define what information is required, by linking it to their reporting structures and requirements.

Monday, 23 September 2002

Early in the morning attended the training session of the Laboratory Teams. After the training session, Paul and I had a meeting with Catherine Phiri (Catherine Chirwa was only able to join use later). In this meeting the proposed MIS was discussed and it was explained how this would relate to and depend on the “other” MIS processes – the national EMIS annual School Survey and the introduction of the proposed DEMIS.

Catherine Phiri indicated it was important to consider the following issues:

- SHN drug treatment
- Tracking the drugs provided
- Calculating the drugs required
- Availability of water at schools
- Tracking the establishment of production units at schools

Through the discussion that followed the following was agreed to:

- The SHN MIS would be based on the school as the entry point
- It would be good to tie in reporting on (decrease in) absenteeism and (increase in) enrolment numbers.
- The SHN MIS data requirements are dependant on a once-off or annual submission – however there will be value in reporting on other monthly or termly changes in enrolment. Hence the SHN MIS is quite dependent on the introduction of DEMIS or a similar system.
- The proposal for the introduction of the SHN is to be presented to the MIT (Management Implementation Team) and then taken forward to the PSS and Permanent Secretary.
- Consideration would be given to standardizing the period of drug administration – probably School Term 2.

I then went on to provide a demonstration of a district based system (not related to SHN) that had been developed with the intention that this provide a visible sample of what we were hoping to achieve. Ms Phiri stresses that the computer system should be “simple” and not too complex.

Since Ms Chirwa was not present during the entire course of the meeting, I spent some time with her explaining what had been discussed with Ms Phiri. It was also considered important that Ms Chirwa provide some input into the discussion around the MIS design. Ms Chirwa indicated that

she had nothing further to add at this stage but would consider what we had discussed and then meet with me later in the week.

In the afternoon I attended the training session of the Bio-medical Teams and in the evening, spent time chatting to the PCD team about the day's meetings and seeking further clarity on the proposed SHN MIS.

Tuesday, 24 September 2002

In the morning went out with one of the Bio-medical Teams to observe this aspect of the programme. I travelled with Catherine Chirwa who indicated that she did not have anything to add to the previous days discussion. The principal of school I visited, Maguya Primary, was not present so I spent some time chatting to the deputy principal. He indicated that school record keeping was not really that strong in the school. He was however able to show me the SHN records as well as some of the Health Cards for the pupils. In the principal's office, summary statistics had been prepared on a poster and the deputy indicated that these were the figures that were used for reporting. The deputy indicated that absenteeism is rife amongst the children and teachers – but records are not really kept of this at this stage, however, teachers can report on learner absenteeism.

In the afternoon I observed the laboratory session and how the findings of the analysis were recorded and then assisted the PCD team to prepare for the next days fieldwork.

In the evening I worked on a draft document (annexure A) to present to Catherine Phiri, Catherine Chirwa, Paul Freund and Chris Samoonga. In this document I aimed to suggest a possible structure for the data collection instrument and also highlight links to the other MIS interventions.

Wednesday, 25 September 2002

In the morning I went out with the Treatment Team to visit two schools, Maguya and Chimanda, to observe the administration of the drugs. The principal was not available at Chimanda, (his wife had been admitted into hospital for the delivery of their child), and he had two un-qualified assistants standing in for him since there were no other members of staff appointed to the school. The assistants were unable to provide any clarity on school record keeping systems or how information is generally managed or kept at the school.

On our return to Chipata, Paul Freund and I sat down to discuss the proposed data collection instruments (annexure A). Paul provided invaluable insights and was able to provide further clarity¹ on some issues. Dr Freund was most supportive of the proposed way forward and felt that the MIS needs would be met.

¹ The suggested changes are yet to be made to the discussion document (v1.2)

Earlier I had provided a copy of the form to Catherine Phiri and Catherine Chirwa. I managed to spend some time with Catherine Phiri discussing the form with her. She indicated she was happy with what she saw and felt that the MIT would be able to guide us with some of the categories of information that were required in the form – e.g. details of life skills programmes and material used. Catherine Phiri indicated that she would also like to spend time with Paul Freund to discuss the form. Paul and Catherine met and Paul reported that Catherine indicated she wanted some additional information relating to the production units – e.g. number of trees by type, and number of other crops grown.¹

At the end of the day, Chris Samoonga and I sat down to chat about the process and proposed forms. I indicated some concern regarding the tracking of drugs prior to the delivery to the school. Chris assured me that the drug tracking MIS, within the MoH (Medical Stores) worked well with other drug administration programmes and the SHN drugs would be administered along similar lines. He did however feel it important that MoE and MoH officials would need to run regular checks between the two systems. The PHO should check with the PEO and vice versa and the DHMT and DEO could also check on drug delivery within the two ministries.

Chris Samoonga felt it would be critical that the DHMT and DEO work closely together and that there should be regular reporting between these two parties/bodies. Chris suggested that the SHN MIS provide a reporting mechanism (on receipt of drugs) for the DEO and that this should be tabled at a monthly meeting at which the DHMT could also present their figures (from the Medical Stores MIS) for comparison. Any discrepancies would then need to be addresses at this level. Chris agreed to continue working on the project with a special interest in strengthening the DHMT and DEO links.

In the late afternoon I met up with Catherine Chirwa who indicated she had a quick look at the forms but had no suggestions regarding any changes required. She indicated should there be any amendments at a later stage, she would report these to Paul for onward transmission to me.

Shared an evening meal with PCD, Catherine Phiri, Chris Samoonga and Victor from MOH.

Thursday, 26 September 2002

Early in the morning had a quick debriefing meeting with Michael Beasley and Paul Freund. Paul indicated he was happy with the progress made on the MIS. I raised one concern that I felt was there did not appear to be much evidence for ownership of the MIS – as yet – and the success of the MIS would depend largely on this. It was highlighted as an issue that would need to be carefully monitored throughout implementation.

Michael Beasley and I left at 09:00 with the MoH team to travel back to Lusaka.

Friday, 27 September 2002

Early in the morning I went across to the MoE. I was not able to meet with Bupe Masondo or Drake Warrick, but left notes for them. I met up with Mr Alfred Sikazwe who indicated that I should please do whatever is required to “resuscitate” the DEMIS proposal. When I reported on the SHN MIS programme, he indicated his support for a DEMIS pilot to be run along side the SHN MIS in the Eastern Province – if the CHANGES team and PCD supported this. Mr Sikazwe indicated that there was no further protocol required from the MoE point since the PS was aware of and supported the introduction of the DEMIS.

I then went on to briefly meet with Ms Irene Mlambo (the HIV/AIDS focal person) who also indicated her support for the DEMIS to be piloted. She indicated she would run a pilot in a few schools in the Lusaka District and would support any work that could be done in the Eastern Province.

Reported to Michael Beasley on the MoE interaction and we agreed that the DEMIS pilot project would complement the SHN MIS greatly, since we would be reporting on learner absenteeism, learner drop out and orphaning and changes in enrolment at school level.

Returned to South Africa on the midday flight.

Prepared by: **Wendy Heard**
6 October 2002, Durban

Follow up required:

- Wendy Heard to prepare a detailed implementation plan
- Wendy Heard to introduce the suggested changes to the proposed MIS data collection forms
- Wendy Heard to prepare a submission to be made to the MOE to gain the necessary approval and support for the introduction of the MIS
- Once the submission received, Catherine Phiri to arrange a date for presentation to MIT and the PS
- Contract between ICON and Wendy Heard to be finalised

Related issues:

Follow up on DEMIS pilot in the Eastern Province with PCD, CHANGES and USAID MTT

Annexure A**Proposed SHN Data Collection Instruments – the basis of the proposed SHN MIS**

- 1. To include as part of the drug administration (treatment) process.
Will be on printed on card to accompany the delivery of drugs (or part of the treatment form submission)**

Description:

School summary of “Treatment form” - Class recording form for treatment of Bilharzia and Intestinal Worms and Administration of Vitamin A and Iron Tablets (appendix H)

1.1 General information

School EMIS number: <6 digit>

School Name:

Province:

District:

Zone:

Status: lower / middle / upper /

multi grade / mixed

Quick count:

Pupils (boys / girls / total) Teachers (male / female / total)

1.2 Indicate number of drugs received at school:

To confirm: What document accompanies the delivery of drugs.

Praziquantel	Albendazole	Vitamin A	Iron	Date Received	Reference of Delivery Note

1.3 Provide the following number from the Class Recording Form:

To confirm: Teachers able to report on urine and worms + ve ?

Grade	Number Pupils	Number Urine + ve	No of praziquantel tabs given	Drug Date given	G/I Worms + ve	No of Albendazole tabs given	Drug date given	No of Vitamin A given	Number of Iron tablets given										Date course of iron tabs completed	No of pupils showing the following side effects						
									1	2	3	4	5	6	7	8	9	10		Headache	Stomach Ache	Diarrhea	Vomiting	Fever		
1																										
2																										
3																										
4																										
5																										
6																										
7																										
8																										
9																										
Total																										

1.4 *Indicate number of drugs still in stock at school after drug administration:*

To confirm: should his be included – or should I be calculated?

Praziquantel	Albendazole	Vitamin A	Iron

2. During Pilot phase will run as separate questionnaire – post pilot possibly include in the Basic School Annual Return

Description:

School specific questions designed to track implementation of the BESSIP SHN programme.

2.1 General information

School EMIS number : <6 digit> School Name:
 Province: District:
 Zone: Status: lower / middle / upper / multi grade / mixed
 Quick count: Pupils (boys / girls / total) Teachers (male / female / total)

2.2 Information relating to School Health and Nutrition

Is your school involved in the Pilot SHN programme?				Yes	No
Does your school administer SHN drugs to pupils?				Yes	No
Indicate the number of teachers trained to administer SHN drugs					
Does your school have a functioning School Health Team?				Yes	No
If Yes, indicate the number of representatives for each of the following groups who are members of the School Health Team.					
VI. Head Teacher		Health and Nutrition Focal Person			
<i>Teachers who are patrons</i>		<i>Pupils</i>			
<i>Health Centre representative</i>		<i>Community development staff</i>			
<i>Chief or Headman</i>		<i>Representative from WASHE committee</i>			
<i>PTA chairman or representative</i>		<i>NHC chairperson or representative</i>			
<i>Community Health worker</i>		<i>NGOs representative</i>			
<i>Representative of Church</i>		<i>Others</i>			
Has the school developed a School Health policy?				Yes	No
Indicate which of the following means are used to improve access to health services: (more than one option may be marked)					
First Aid treatment		Refer pupils to health centres		Counsels and support to pupils	??
Do you maintain the School Health Card (SHN 01) for all pupils?				Yes	No
Which of the following Active Health Promoting Clubs are active in your school?					
Anti AIDS		Red Cross		Young farmers	Popular drama/cultural groups
					Child to Child

Has a school health and nutrition Resource Corner been established in your school?				Yes	No
Has a school garden (production unit) been established in your school?				Yes	No
How many fruit trees are planted in the school garden?			How many suckers have been planted in the school garden?		
Does the school have hand-washing facilities, with running water, for after the use of toilets?				Yes	No
Are there adequate facilities for refuse disposal at school?				Yes	No
Does the school run a life skills programme?				Yes	No
If Yes, what materials are used?					
??	??	??	??	??	??
How many teachers are trained to run the life skills programme?					

3. Data to be drawn from the National EMIS database

Description:

These data fields will be collected through the national Basic School Annual EMIS Return and linked to the proposed SHN MIS

EMIS number
 GPS Readings
 Name of school
 Pupils by grade, gender and age
 Number of classes
 Number of orphans by grade and gender
 Number of teachers
 Infrastructure details relating to
 Water
 Sanitation

Also : Postal address
 Founding Agency
 Details of School Head
 Rural and Urban classification
 Day or Boarding

4. Identified Data needed not yet covered if Monthly/Termly DEMMIS not implemented

Increase in orphans
 Absenteeism
 Number of school leavers and new entrants – reported regularly

Annexure B

Summary Implementation Plan

<i>Phase</i>	<i>Activity</i>	<i>Time-Line</i>	<i>Deliverables</i>
System Investigation	<ul style="list-style-type: none">▪ Develop common understanding of MIS requirements.▪ End User Needs Analysis▪ Analysis of data and reporting requirements▪ Consideration of system links▪ Documenting of system recommendations required for approval	<i>Site visit: Sept 2002</i> <i>Motivation and Report: End Oct 2002</i>	<ul style="list-style-type: none">▪ Trip Report▪ Document for presentation to MIT – including draft survey instruments and PowerPoint presentation
System Design	<ul style="list-style-type: none">▪ Logical design▪ Physical system design▪ Database design▪ Manual development▪ System Testing▪ System design report for approval	<i>Delivery: March - April 2003</i>	<ul style="list-style-type: none">▪ System Design report▪ Data collection instruments▪ Proto-type of Database▪ Proto-type of System Manual
System Implementation	<ul style="list-style-type: none">▪ Training – systems and database▪ Site preparation▪ Data Collection▪ Data preparation▪ Installation▪ Pilot	<i>Delivery: May – June 2003</i> <i>System to run through to: October 2003</i>	<ul style="list-style-type: none">▪ Training Manuals▪ System Manual▪ Database for implementation
System Evaluation and Review	<ul style="list-style-type: none">▪ Database review▪ Application review▪ Personnel review▪ Procedures review▪ Systems Performance Measurement▪ Agreement on amendments required▪ System refinement▪ System handover	<i>Delivery: December 2003</i>	<ul style="list-style-type: none">▪ Amended database▪ Close out report with recommendations to take system to scale